PART B - FEE(S) TRANSMITTAL oniplete and Ond the form, together will applicable fee(s), to: Mail Mail Stop ISSU Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 MAY 0 1 2006 or Fax (571) 273-2885 INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. Although 5 should be completed where appropriate. Although 5 should be completed where appropriate. Although 5 should be completed where appropriate address as indicated unless that the current correspondence address as indicated unless that the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee nothing and the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee nothing and the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee nothing and the current correspondence address as a separate "FEE ADDRESS" for maintenance fee nothing and the current correspondence address as a separate "FEE ADDRESS" for maintenance fee nothing and the current correspondence address as a separate "FEE ADDRESS" for maintenance fee nothing and the current correspondence address as a separate "FEE ADDRESS" for maintenance fee nothing and the current correspondence address as a separate "FEE ADDRESS" for maintenance fee nothing and the current correspondence address as a separate "FEE ADDRESS" for maintenance fee nothing and the current correspondence address and the current corresponden Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 26529 01/25/2006 BLAKELY SOKOLOFF TAYLOR & ZAFMAN/PDC Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. 12400 WILSHIRE BOULEVARD SEVENTH FLOOR LOS ANGELES, CA 90025 (Depositor's name) HIGHAM 05/02/2006 EAREGAY2 00000130 10072465 (Signature 1400.00 OP 01 FC:1501 (Date 02 FC:1504 300.00 OP APPLICATION NO. FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. FILING DATE 10/072,465 02/06/2002 1020. -042390P8943X4 1829 Carl R. Strathmeyer TITLE OF INVENTION: APPARATUS AND METHOD FOR COMPUTER CONTROLLED CALL PROCESSING AND INFORMATION PROVISION SMALL ENTITY ISSUE FEE **PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE APPLN. TYPE NO 04/25/2006 nonprovisional \$1400 \$300 \$1700 **EXAMINER** ART UNIT **CLASS-SUBCLASS** LY, ANH VU H 2667 370-352000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list 1 KACVINSKY LLC (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a ☐ "Fee Address" indication (or "Fee Address" Indication form registered attorney or agent) and the names of up to PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) INTEL CORPORATION SANTA CLARA, CA Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🔳 Corporation or other private group entity 🛄 Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Issue Fee Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. ☐ Advance Order - # of Copies ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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